

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (Includes Reference to PCT International Applications)			ATTORNEY'S DOCKET NUMBER 19603/4612 (CRF D-3318-03)
As a below named inventor, I hereby declare that:			
My residence, post office address and citizenship are as stated below next to my name.			
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:			
METHOD OF IDENTIFYING STRATEGIES FOR TREATMENT OR PREVENTION OF VENTRICULAR FIBRILLATION AND VENTRICULAR TACHYCARDIA			
the specification of which (check only one item below):			
<input type="checkbox"/> is attached hereto.			
<input type="checkbox"/> was filed as U.S. Patent Application Serial No. _____ on _____ and was amended on _____ (if applicable).			
<input checked="" type="checkbox"/> was filed as PCT International Application Number PCT/US2005/002848 on 02 February 2005 and assigned U.S. Serial No. 10/588,395.			
I hereby state that I have reviewed and understand the contents of the above-identified specifications, including the claims, as amended by any amendment referred to above.			
I acknowledge the duty to disclose information which is material to the patentability of this application in accordance with Title 37, Code of Federal Regulations, § 1.56(a).			
I hereby claim priority benefits under Title 35, United States Code, § 119 of any application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States listed below and have also identified below any application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:			
PRIOR APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:			
COUNTRY (IF PCT, indicate "PCT")	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 35 USC 119
USA	60/541,531	03 February 2004	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (Continued) (Includes Reference to PCT International Applications)				ATTORNEY'S DOCKET NUMBER 19603/4612 (CRF D-3318-03)	
<p>I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, § 1.56(a) which occurred between the filing date of the prior application(s) and the national or PCT International filing date of this application:</p>					
<p>PRIOR U.S. APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS DESIGNATING THE U.S. FOR BENEFIT UNDER 35 U.S.C. 120:</p>					
U.S. APPLICATIONS			STATUS (Check One)		
U.S. APPLICATION NUMBER	U.S. FILING DATE	PATENTED	PENDING	ABANDONED	
PCT APPLICATIONS DESIGNATING THE U.S.					
PCT APPLICATION NO.	PCT FILING DATE	U.S. SERIAL NUMBERS ASSIGNED (if any)			
PCT/US2005/002848	02 February 2005	10/588,395		X	
<p>POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) associated with the following customer number to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. 26774</p>					
Send Correspondence to: 26774			Direct telephone calls to: Michael L. Goldman (585) 263-1304		
2 0 1	FULL NAME OF INVENTOR	FAMILY NAME GILMOUR, JR.	FIRST GIVEN NAME Robert	SECOND GIVEN NAME	
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	POST OFFICE ADDRESS	P.O. ADDRESS 100 Graham Road, 12A	CITY Ithaca	STATE & ZIP CODE/COUNTRY New York 14850 U.S.A.	
<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.</p>					
SIGNATURE OF INVENTOR 201		SIGNATURE OF INVENTOR 202		SIGNATURE OF INVENTOR 203	
DATE 9/18/06		DATE		DATE	